

Listening Session: African-American Employees & Employers

The Workplace Partnership Group conducted a listening session on Wednesday, January 20, 2016, to engage the African-American community. The session was conducted at the Urban League of Minneapolis, 2100 Plymouth Ave N, beginning at 5:15 p.m. Participants representing employees from various industries were invited to provide their perspectives in response to a pre-arranged set of questions related to policy issues concerned with earned sick time and paid time-off (PTO). The following is a summary of feedback from this listening session.

PARTICIPANT FEEDBACK

[The following questions established the broad framework within which participants were invited to provide feedback.]

Question #1. How broadly or narrowly should the City of Minneapolis consider coverage to effectively address the public health and equity concerns associated with policies related to earned sick time and paid time-off?

Question #2. How should paid sick time and/or paid time-off be used? What are your experiences in offering this kind of coverage, or in using paid sick time?

Question #3. How should paid sick time and/or paid time-off be earned? Should it vary by hours worked, business sector, revenue, number of employees? Should it be capped?

Question #4. What, if any, measures should be considered to ensure workers are not penalized for using paid sick time, and to ensure that employers are not subject to undue hardship or abuse of such policies?

Several participants spoke of their experiences in the workplace where, lacking access to paid sick time or paid time-off policies, they were forced to make difficult choices between whether to work while sick or stay home to recover and get well; in some cases, examples of employer abuses were offered illustrating how particularly low-wage earners and entry-level workers faced oftentimes steep reprimands, up to and including termination, if they chose to take time from work to address their personal healthcare needs or to care for their dependent family members.

One speaker noted that he was a former worker at Target Center, where he was also a member of the workers' union. In that position, he lacked access to paid sick time. Unfortunately, due to an incident of mistaken identity involving the police, he suffered a broken hand and needed to take time from work to recuperate, as directed by his doctor. The employer offered him 3 days without pay; however, that time was not sufficient for his needed recovery. So, when he followed the doctor's orders and missed more than those 3 unpaid days, which also presented a financial burden to him and his family, he ultimately ended up losing his job, even though he'd worked at Target Center for five years. Being the primary caregiver to his children and his mother, losing this job had a negative spiraling effect on this family, creating financial pressures about how to make ends meet and pay bills.

Another speaker said he now was in the first job where he had access to paid sick time, which had made a significant, positive difference in his life. He said that, by comparison, lots of white people already have and have had access to such benefits, emphasizing the disparities in Minneapolis that have received much local and national attention in the past year. He questioned how police officers could qualify for such benefits as paid sick time and paid time-off even if they had killed someone, yet many hard-working, entry-level workers in low-wage jobs were denied similar benefits and who, if they don't show up to work because they are sick,

will be disciplined and even fired. The inequity of that situation, he said, contributed to a systemic institutional problem that primarily targeted communities of color and denied them access to benefits typically provided to others. Another speaker added that, particularly for the African-American community, these disparities were heightened in light of significant national attention to the deaths of black men by police officers. It was difficult to accept that police officers—even in those situations—remained eligible to take advantage of benefits such as paid sick and PTO when workers from the poorest neighborhoods and areas that have suffered economic hardship continued to be denied such benefits.

Several speakers noted the additional burden for workers with children when access to paid sick time or PTO is unavailable. Participants urged the city to focus on the needs of working families in order to assure they have the kinds of support necessary to care for their children. All participants agreed that paid sick time should not be limited to use by the employee; rather, it should be a benefit to the worker to address their personal healthcare needs as well as the healthcare needs of the families. One speaker said that parents want what is best for their children, and sometimes that requires sacrificing work-related responsibilities in order to attend to the most important obligations of caring for children in the family. Without access to paid sick time to ensure jobs are secure, workers are sometimes forced to make terrible choices between prioritizing their families and their jobs. All agreed that was wrong. One speaker noted that because he had access to paid sick time at his current job, he was able to stay home with his daughter for 2 days during a recent illness. Because he had earned that sick time, he didn't suffer financially for missing work, was able to make ends meet, paid his bills, put food on the family table, and cared for his child. He said the kind of policy being discussed—where the city could mandate a certain level of uniform sick time leave for all employees—would throw a wrench into the cycle of poverty and help lift families up.

Another speaker talked about the experiences of her mother, who lost her job because she had to stay home because of illness. The company had instructed her mother to phone each day no later than 3 hours prior to the scheduled start of her regular shift in order to confirm she was still ill and unable to work that day. Her mother called 2 hours prior to the scheduled start of her shift, not 3 hours as instructed, and was, therefore, fired from the job. The speaker said this type of treatment of workers was unnecessarily harsh. She questioned what businesses would do without workers, suggesting that the answer to that rhetorical question should prompt businesses to provide better coverage for their workers, such as paid sick time.

In response to a question from moderators, the majority of participants in the listening session agreed that they were more likely to apply for a job offering benefits such as paid sick time or paid time-off. One participant elaborated on this point by offering personal examples from previous jobs where paid sick time was offered and where it was not;

One participant said her sister, the mother of 2 children, worked in a restaurant chain but had to take up to 6 weeks off work resulting from a Cesarean-section delivery of her youngest child. She said the employer threatened her sister's job because they claimed a lack of workers to cover the number of shifts. This job was her sister's only source of income and when she was fired, for being absent from work, she had no income at all and became homeless as a result. The speaker said that, in Minneapolis, African-Americans were at the bottom of the totem pole and were made to endure the hardships posed by failed systems that targeted workers of color in unfair ways; this was part of the struggle facing Minnesota, and Minneapolis, in terms of disparities and inequalities. She said that earned sick and safe time were essential to all workers, not an "extra" to be considered for some workers but not others. She said no one should be forced to work while they are sick, potentially exposing co-workers, customers, and others to illness and infection.

One participant suggested that businesses should provide a schedule of work hours and clearly indicate how many paid sick days are available to workers, even allowing workers to trade assigned shifts or scheduled work hours, thereby minimizing negative operational impacts for businesses. Also, workers should provide a doctor's note to verify illness and/or the need for paid sick leave so that the businesses have proof of the need and the worker's job is protected and cannot be threatened because of the verified need for paid sick time away from the workplace. He suggested this kind of system would benefit the needs of both business

owners and workers, would provide a fair and balanced approach, and minimize the potential for abuses from employers and employees.

It was suggested that all workers should automatically be given 2 to 3 days of paid sick time at the beginning of employment, after which the employee would be eligible to accrue additional paid sick time. Some stated that there should not be a provision requiring a doctor's note to verify illness or to claim access to paid sick time. Requiring a doctor's note necessitated time away from work to get an appointment, and such appointments inevitably imposed a financial burden on the worker, which was seen as a kind of "double strike" against workers. As an example, one speaker said it was unnecessary to require a doctor's note for a worker who needed to stay home because of the common cold. Many agreed that if illness required (or resulted in) an extended absence from work, then a doctor's note might be necessary in order to assure business owners of the legitimate need and to protect the employee's position in the workplace.

Some participants questioned how paid sick time or PTO would actually be used; for example, how would such hours be used for the individual worker versus the needs of the worker's family or dependents? If a worker had to miss work to care for dependent family members, would that leave be deducted from the total accrued sick time or PTO? If that time were reduced, what impact would that have on the ability of the worker to care for himself or herself when they were sick, but had less sick time available, due to the care for others? Would a city policy limit the use of paid sick time or PTO? In response, one participant repeated the proposal for requiring a doctor's note and suggested eliminating any need for tracking accruals of sick time or PTO. If an employee provided a doctor's note verifying the need for an employee to be absent from the workplace, the employer would grant the hours or days required. The doctor's note would give assurance to business owners that employees had legitimate healthcare needs necessitating the absence from the workplace and would also serve, under the city mandate, to protect the employee's claim to the position. This same approach would apply to the employee's dependent family members as well, to address the needs already discussed about a holistic approach to "family care" under a universal sick time policy.

Another participant suggested that all workers should be given 2 paid sick days on the first day of employment with the ability to accrue 1 additional paid sick day every month, for a total of 14 paid sick days per year.

There was discussion about whether the concept of sick time needed to be split to address short-term sickness (like the common cold or flu) and long-term, more serious healthcare issues (such as cancer or organ transplants) that often required significant medical treatment, including hospitalization. A sick time policy that only addressed 1 or 2 days per month would be insufficient to cover a more significant healthcare issue. The idea of allowing workers to bank leave times, flex time, and the ability to swap scheduled shifts with other workers helped to offset some concerns related to short-term absences. However, concerns about the extra burdens to address significant healthcare challenges remained. To the question of significant, long-term healthcare issues, one participant expressed the need to have accrued sick time carry over from year to year, thereby allowing employees to bank their accrued hours for future needs, which would potentially address those situations. Another participant suggested that all workers should receive at least 5 paid sick days per month with an additional 3 paid "emergencies" each year. She said this sounded like a significant amount, but was not too much, in her opinion, when considering the total number of hours employees spend at the workplace during the week, multiplied over months and years. She also suggested that in addition to paid sick time, all businesses should be required to provide health insurance to employees (to include coverage for dependent family members).

One participant said coverage might vary according to the business sector. Based on her own experiences, she could see a difference between small businesses and certain industries, like the restaurant industry, as compared to large corporations that were mostly office work environments. She noted that individuals have to build their lifestyle around their income, and having access to a specific amount of paid sick time helped to plan your activities. When those are unknown factors, it is difficult to schedule daily activities let alone a full year ahead.